Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 1 of 57

Fill in this information to identify your c		
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS		
Case number (if known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Р	art 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture	Hesham	Inji
	identification (for example,	First Name	First Name
	your driver's license or	M	Н.
	passport).	Middle Name	Middle Name
		Ahmed	Elsheikh
	Bring your picture	Last Name	Last Name
	identification to your meeting		
	with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you		
	have used in the last 8 years	First Name	First Name
	•	Middle Name	Middle Name
	Include your married or		
	maiden names.	Last Name	Last Name
3.	Only the last 4 digits of		
	your Social Security	$xxx - xx - \underline{9} \underline{7} \underline{4} \underline{0}$	$xxx - xx - \underline{6} \underline{6} \underline{3} \underline{4}$
	number or federal Individual Taxpayer	OR	OR
	Identification number	9xx - xx -	9xx - xx -

(ITIN)

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 2 of 57

	otor 1 Hesham M A Inji H. Elshe		Case number (if known)
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer	,	INs. I have not used any business names or EINs.
	Identification Numbe (EIN) you have used the last 8 years	<u></u>	Business name
	Include trade names a		Business name
	doing business as nar	Business name	Business name
		EIN	EIN
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		10416 S. Menard	Newbox Otrost
		Number Street	Number Street
		Apt 3N	
		Oak Lawn IL 60453	
		City State ZIP Code	City State ZIP Code
		Cook County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.
		Number Street	Number Street
		P.O. Box	P.O. Box
		City State ZIP Code	City State ZIP Code
6.	Why you are choosin	-	Check one:
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)
P	art 2: Tell the C	ourt About Your Bankruptcy Case	
7.	The chapter of the Bankruptcy Code you are choosing to file		Notice Required by 11 U.S.C. § 342(b) for Individuals Filing of page 1 and check the appropriate box.
	under	Chapter 7	
		Chapter 11	
		Chapter 12	
		Chapter 13	

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 3 of 57

	otor 1 otor 2	Hesham M Ahmed Inji H. Elsheikh				ase num	ber (if known)			
8. How y		v you will pay the fee		court pay v	pay the entire fee when I file my petition for more details about how you may pay. With cash, cashier's check, or money orde If, your attorney may pay with a credit car	Typicall r. If your	y, if you are pay attorney is subi	ring the fee yourself, you may mitting your payment on your		
					I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).					
				By la than fee ir	west that my fee be waived (You may rew, a judge may, but is not required to, wa 150% of the official poverty line that appliant installments). If you choose this option, Fee Waived (Official Form 103B) and file	ive your f es to you you mus	ee, and may do ir family size an t fill out the App	so only if your income is less d you are unable to pay the		
bank	-	ou filed for	$\overline{\mathbf{V}}$	No						
	last 8 y			Yes.						
			Dist	rict _		When		Case number		
			D:-4							
			Dist	rict _		_ when	MM / DD / YYYY	Case number		
			Dist	rict _		When		Case number		
			_				MM / DD / YYYY			
10.		y bankruptcy pending or being	\checkmark	No						
	-	y a spouse who is		Yes.						
		ng this case with r by a business	Deb	otor _			Relationsh	ip to you		
	-	r, or by an	Dist	rict _		When		Case number,		
	affiliate	e ?					MM / DD / YYYY	if known		
			Deb	otor			Relationsh	ip to you		
			Dist	rict _			MM / DD / YYYY	Case number,		
11.	Do you reside	u rent your nce?		No. Yes.	Go to line 12. Has your landlord obtained an eviction in the second sec	udgment ut an Evid	against you?			

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 4 of 57

Debtor 1 Hesham M Ahmed Inji H. Elsheikh						Case number	(if known)		
Pa	art 3: Re	port About Ar	າy Bເ	ısine	sses You Own as	a Sole Proprietor			
12.	Are you a so of any full- o business?				Go to Part 4. Name and location of b	pusiness			
	individual, an separate lega	operate as an			Name of business, if any Number Street				
	If you have m sole proprieto separate she to this petition	orship, use a et and attach it			Health Care Busi	e box to describe your business iness (as defined in 11 U.S.C. § al Estate (as defined in 11 U.S. defined in 11 U.S.C. § 101(53A er (as defined in 11 U.S.C. § 10	§ 101(27A)) C. § 101(51B))	ZIP Coo	de
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i>		can mos	set ap	ppropriate deadlines. If nt balance sheet, staten	the court must know whether y you indicate that you are a smanner of operations, cash-flow so to exist, follow the procedure in	all business deb tatement, and fe	tor, you rederal inc	must attach your come tax return
	debtor?	$\overline{\checkmark}$	No.	I am not filing under C	hapter 11.				
	For a definition	For a definition of small		No.	I am filing under Chap the Bankruptcy Code.	eter 11, but I am NOT a small b	usiness debtor a	according	g to the definition in
	11 U.S.C. § 101(51D).		Yes.	I am filing under Chap Bankruptcy Code.	ter 11 and I am a small busine	ss debtor accord	ding to th	ne definition in the	
Pa	art 4: Re	port If You Ov	vn oı	r Hav	e Any Hazardous I	Property or Any Propert	y That Need	s Imm	ediate Attention
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			No Yes.	What is the hazard?				
					If immediate attention	is needed, why is it needed?			
		•			Where is the property	? Number Street			
						City		tate	ZIP Code

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 5 of 57

Debtor 1 Hesham M Ahmed

Debtor 2 Inji H. Elsheikh Case number (if known)

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

credit counseling because of:							
☐ Incapacity.	I have a mental illness or a mental deficiency that makes me						
	incapable of realizing or making						

□ I am not required to receive a briefing about

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case): You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required	to receive	a briefing	about
credit counseling	because o	of:	

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 6 of 57

Debtor 1 Debtor 2		Hesham M Ahmed Inji H. Elsheikh	Case number (if known)								
P	art 6:	Answer These Q	luest	ions	for	Reporting Pu	ırpos	ses			
6.	What ki	ind of debts do you	16a		incu No		dual pr	sumer debts? Consumer de imarily for a personal, family,		re defined in 11 U.S.C. § 101(8) usehold purpose."	
			16b		Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17.						
			16c	. Sta	te th	e type of debts y	ou ow	e that are not consumer or bu	sines	s debts.	
7.	Are you Chapte	ı filing under r 7?		No.	Ιa	m not filing unde	r Chap	oter 7. Go to line 18.			
	any exe	to you estimate that after my exempt property is xcluded and dministrative expenses re paid that funds will be vailable for distribution o unsecured creditors?	☑	Yes.	s. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?						
					$\overline{\mathbf{V}}$	No					
	availab					Yes					
8.		any creditors do imate that you		1-49 50-99 100-1 200-9	99			1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000	
9.		uch do you e your assets to th?		\$100	01-9 ,001	00 \$100,000 -\$500,000 -\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
20.		uch do you e your liabilities to		\$100	01-9 ,001	00 \$100,000 -\$500,000 -\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 7 of 57

Debtor 1 Debtor 2	Hesham M Ahmed Inji H. Elsheikh		Case number (if known)			
Part 7:	Sign Below					
For you		I have examined this petition, and I declare und and correct.	ler penalty of perjury that the information provided is true			
		•	ware that I may proceed, if eligible, under Chapter 7, 11, 12, and the relief available under each chapter, and I choose to			
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).				
		I request relief in accordance with the chapter of	of title 11, United States Code, specified in this petition.			
		_	ling property, or obtaining money or property by fraud in fines up to \$250,000, or imprisonment for up to 20 years, 71.			
		X /s/ Hesham M Ahmed Hesham M Ahmed, Debtor 1	X /s/ Inji H. Elsheikh Inji H. Elsheikh, Debtor 2			

Executed on 12/23/2017

MM / DD / YYYY

Executed on $\frac{\textbf{12/23/2017}}{\textbf{MM / DD / YYYY}}$

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 8 of 57

Debtor 1 Debtor 2	Hesham M Ahmed Inji H. Elsheikh			_ Case number (if kn	nown)				
-	attorney, if you are ed by one	I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to							
•	not represented by ey, you do not need page.				ein which § 707(b)(4)(D) ap in the schedules filed with th				
		X /s/ Claudia F. Signature of At	T. Badillo ttorney for Debtor	Da	ate 12/23/2017 MM / DD / YYYY				
		Claudia F. Ba	adillo						
		Printed name Badillo Law	Group, P.C.						
		Firm Name 8745 W. Higg	gins Rd.						
			Street						
		Chicago City		IL State	60631 ZIP Code				
		Contact phone	(773) 716-7736	Email address bac	dillolawyer@gmail.com	l			
		6294992		<u>L</u>					
		Bar number		State					

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 9 of 57

Fill in this inf	ormation to i	dentify you	r case and this fil	ing:		
Debtor 1	Hesham	М	Ahmed			
Destor 1	First Name	Middle Na				
Debtor 2	Inii	Н.	Elsheikh	,		
(Spouse, if filing)		Middle Na				
United States Ba	nkruptcy Court fo	or the: NORTH	ERN DISTRICT OF	ILLINOIS		
Case number						
(if known)					_	if this is an led filing
Official Form	106A/B					
Schedule A		у				12/15
the asset in the ca filing together, bo sheet to this form	ategory where y th are equally re . On the top of	ou think it fits esponsible for any additional	best. Be as complete supplying correct inf pages, write your nar	e and accurate as pormation. If more me and case numb	et fits in more than one cat possible. If two married pe space is needed, attach a per (if known). Answer eve tate You Own or Have	eople are separate ry question.
Part II. De	SCIIDE Each i	Residence, i	Building, Land, or	Other Real ES	tate fou Own or nave	an interest in
✓ No. Go t		•	interest in any reside	nce, building, land	l, or similar property?	
	-	-	n for all of your entries tt 1. Write that numbe			\$0.00
Part 2: De	scribe Your \	/ehicles				
you own that some	one else drives.	If you lease a		•	registered or not? Include cutory Contracts and Unexpi	-
□ No ☑ Yes						
3.1. Make:	Toyota		ho has an interest in eck one.	the property?	Do not deduct secured clai amount of any secured clai	ims on Schedule D:
Model:	Rav4	~	4		Creditors Who Have Claim	
Year:	2016		Debtor 2 only	0	Current value of the entire property?	Current value of the portion you own?
Approximate milea	ge: 26,000		Debtor 1 and Debtor At least one of the de	•		
Other information:			At least one of the di	cotors and another	\$30,000.00	\$30,000.00
2016 Toyota Ramiles)	v4 (approx. 26	000	Check if this is com (see instructions)	nmunity property		
3.2.		w	ho has an interest in	the property?	Do not deduct secured clai	ms or exemptions. Put the
Make:	Nissan		neck one.	• •	amount of any secured claim	ims on Schedule D:
Model:	Murano		Debtor 1 only		Creditors Who Have Claim	
Year:	2015			O amb	Current value of the	Current value of the
Approximate milea	ge: 19,000	[Debtor 1 and Debtor At least one of the de	•	entire property?	portion you own?
Other information:	- ,	L	At least one of the di	CDIOIS AND ANDINE	\$30,000.00	\$30,000.00
2015 Nissan Mu miles)	rano (approx.	19000 🗆	Check if this is com (see instructions)	nmunity property		

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 10 of 57

	otor 1 otor 2	Hesham M Ahmed Inji H. Elsheikh Case number (if known)	
4.		craft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories bles: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories	
	✓ No		
5.		e dollar value of the portion you own for all of your entries from Part 2, including any stor pages you have attached for Part 2. Write that number here	\$60,000.00
Р	art 3:	Describe Your Personal and Household Items	
Do	you owi	n or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Examp	hold goods and furnishings les: Major appliances, furniture, linens, china, kitchenware	
	☐ No ✓ Ye	s. Describe Regular apartment furnishings including bedroom set, living room set, dining room set.	\$1,000.00
7.	Electro Examp	onics les: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games	
	□ No ☑ Ye	s. Describe One ipad, television set and cellular phones	\$200.00
8.		tibles of value les: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
	☑ No	s. Describe	
9.		ment for sports and hobbies les: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
	☑ No	s. Describe	
10.	Firearı Examp	ns eles: Pistols, rifles, shotguns, ammunition, and related equipment	
	☑ No	s. Describe	
11.	Clothe Examp	s bles: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	□ No ☑ Ye	s. Describe Normal and necessary wearing apparel	\$300.00
12.	Jewelr Examp	ry vles: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver	
	☐ No ☑ Ye	s. Describe Misc. jewelry including 2 rings and necklace	\$500.00
13.		orm animals vles: Dogs, cats, birds, horses	
	☑ No □ Ye	s. Describe	

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 11 of 57

		lesham M Ahm nji H. Elsheikh	ed				Case numbe	er (if known)	
14.	did not li ✓ No ☐ Yes.	•	ousehold	items yo	ou did not alre	eady list, including a	any health aids	s you	
15.						luding any entries f			\$2,000.00
P	art 4:	Describe You	ır Finan	cial Ass	sets				
Do	you own o	or have any legal	or equita	ble intere	est in any of th	ne following?			Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Examples	s: Money you hav petition	e in your v	vallet, in y	our home, in a	a safe deposit box, a	and on hand whe	en you file your	
	✓ No ☐ Yes								
17.		•	es, and o			ertificates of deposit If you have multiple	•	•	
	□ No ✓ Yes			Institutio	on name:				
	17.1	. Checking acc	ount:	Checki	ing account	with Chase Bank	(\$500.00
18.	Example: No	nutual funds, or ps: Bond funds, inv	estment a	accounts v	with brokerage	firms, money marke	et accounts		
19.	Non-pub		and inte	rests in ir	ncorporated a	and unincorporated	businesses, ir	ncluding	
	□ No ✓ Yes. inform	Give specific mation about	-		· vo.nui			2. 6	
	tnem		Name of 100% o	•	American T	herapy Inc.		% of ownership: 100%	\$2,000.00
20.	Negotiab	<i>le instrument</i> s inc	te bonds lude perso	and other	r negotiable a	nd non-negotiable necks, promissory no someone by signing	otes, and money	y orders.	
	inforr	Give specific mation about	Issuer na	ame:					
21.		ent or pension ac s: Interests in IRA profit-sharing p	, ERISA, I	Keogh, 40	01(k), 403(b), t	hrift savings accoun	ts, or other pens	sion or	
	_	List each	Type of ac	count:	Institution	name:			

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 12 of 57

Deb		Hesham M Ahmed Inji H. Elsheikh Case number (if known)	
		- Case Humber (il known)	
22.	Your sh	y deposits and prepayments are of all unused deposits you have made so that you may continue service or use from a company les: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications nies, or others	
	☐ No		
	✓ Yes	Institution name or individual:	*
		Security deposit on rental unit: Security deposit on rental unit	\$950.00
23.	☑ No	es (A contract for a specific periodic payment of money to you, either for life or for a number of years)	
	_	Issuer name and description:	
24.	26 U.S.	ts in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition proc. §§ 530(b)(1), 529A(b), and 529(b)(1).	ogram.
	✓ No ☐ Yes		§ 521(c)
25.		equitable or future interests in property (other than anything listed in line 1), and rights or sexercisable for your benefit	
	✓ No	s. Give specific	
		ormation about them	
26.		s, copyrights, trademarks, trade secrets, and other intellectual property; les: Internet domain names, websites, proceeds from royalties and licensing agreements	
		s. Give specific	
27.		es, franchises, and other general intangibles les: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licen	ses
	, □ No		
		s. Give specific Physical therapy licenses in Illinois and NY ormation about them	\$100.00
Mon	ey or pı	roperty owed to you?	Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	unds owed to you	
	☑ No		
		s. Give specific information Federal but them, including whether	<u> </u>
		already filed the returns State:	
	and	the tax yearsLocal:	
29.	-	support	
	Example No No	es: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, propert	/ settlement
	_	s. Give specific information Alimony:	
		Maintenance:	
		Support:	
		Divorce settlement:	
		Property settlement	: :

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 13 of 57

	tor 1 tor 2	Hesham M Ahmed Inji H. Elsheikh		Case number (if known)	
		,		Case Humber (ii known)	
30.				uility benefits, sick pay, vacation pay, workers' as you made to someone else	
	✓ No ☐ Yes	s. Give specific information	on		
31.		ts in insurance policies	ife insurance: health savings a	ccount (HSA); credit, homeowner's, or renter's in	surance
	✓ No	oo: Trodiui, diodollity, or il			
	con	s. Name the insurance npany of each policy I list its value	Company name:	Beneficiary:	Surrender or refund value:
32.	Any int	erest in property that is	due you from someone who ng trust, expect proceeds from	·	
	✓ No ☐ Yes	s. Give specific information	on		
33.		•	hether or not you have filed a ent disputes, insurance claims,	a lawsuit or made a demand for payment or rights to sue	
	☐ No ✓ Yes	s. Describe each claim	Debtor involved in car party. No injuries incu	accident, possible claim against other irred.	\$2,000.00
34.		ontingent and unliquida o set off claims	ated claims of every nature, i	ncluding counterclaims of the debtor and	
	✓ No ☐ Yes	s. Describe each claim			
35.	Any fin	ancial assets you did no	ot already list		
	✓ No ☐ Yes	s. Give specific information	on		
36.				ling any entries for pages you have	\$5,550.00
Pá	art 5:	Describe Any Busin	ness-Related Property Y	ou Own or Have an Interest In. List a	any real estate in Part 1.
37.	Do you	own or have any legal o	or equitable interest in any b	usiness-related property?	
	_	Go to Part 6. Go to line 38.			
					Current value of the portion you own?
					Do not deduct secured claims or exemptions.
38.	Accour	nts receivable or commis	ssions you already earned		γ
	✓ No	s. Describe			
39.		equipment, furnishings, eles: Business-related comdesks, chairs, electro	nputers, software, modems, pri	nters, copiers, fax machines, rugs, telephones,	
	□ No ✓ Yes	s. Describe Laptop co	omputer, office furniture,	orinter	\$400.00

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 14 of 57

	tor 1 tor 2	Hesham M Ahmed Inji H. Elsheikh Case number (if known)	
DOL	101 2	Inji H. Elsheikh Case number (if known)	
40.	Machir	ery, fixtures, equipment, supplies you use in business, and tools of your trade	
	□ No ✓ Yes	s. Describe Tension machines, massage equipment used in business	\$1,000.00
41.	Invento	ory	
	✓ No ☐ Yes	s. Describe	
42.	Interes	ts in partnerships or joint ventures	
	✓ No	s. Describe Name of entity: % of ownership:	
43.	Custon	ner lists, mailing lists, or other compilations	
	▼ No □ Yes	s. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? No Yes. Describe	
44.	Any bu	siness-related property you did not already list	
	✓ No ☐ Yes	s. Give specific information.	
45.		e dollar value of all of your entries from Part 5, including any entries for pages you have ed for Part 5. Write that number here	\$1,400.00
P		Describe Any Farm- and Commercial Fishing-Related Property You Own or Have a If you own or have an interest in farmland, list it in Part 1.	n Interest In.
46.	Do you	own or have any legal or equitable interest in any farm- or commercial fishing-related property?	
	<u>-</u>	Go to Part 7.	
	☐ Yes	s. Go to line 47.	
			Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm a	nimals les: Livestock, poultry, farm-raised fish	
	✓ No		
48.	Crops-	either growing or harvested	
		s. Give specific rmation	
49.	Farm a	nd fishing equipment, implements, machinery, fixtures, and tools of trade	
	✓ No	S	
50.	Farm a	nd fishing supplies, chemicals, and feed	
	✓ No	S	

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 15 of 57

	tor 1 tor 2	Hesham M Ahmed Inji H. Elsheikh	Case nu	umber (if known)			
51.	✓ No	rm- and commercial fishing-related property you did no s. Give specific ormation	t already list				
52.	Add the		\$0.00				
Pa	art 7:	Describe All Property You Own or Have an Ir	nterest in That You [Did Not List Al	bove)	
53.	Example No	I have other property of any kind you did not already list les: Season tickets, country club membership s. Give specific information.	it?				
54.	Add the	e dollar value of all of your entries from Part 7. Write th	nat number here		→		\$0.00
Pa	art 8:	List the Totals of Each Part of this Form					
55.	Part 1:	Total real estate, line 2			→		\$0.00
56.	Part 2:	Total vehicles, line 5	\$60,000.00				
57.	Part 3:	Total personal and household items, line 15	\$2,000.00				
58.	Part 4:	Total financial assets, line 36	\$5,550.00				
59.	Part 5:	Total business-related property, line 45	\$1,400.00				
60.	Part 6:	Total farm- and fishing-related property, line 52	\$0.00				
61.	Part 7:	Total other property not listed, line 54	+\$0.00				
62.	Total p	personal property. Add lines 56 through 61	\$68,950.00	Copy personal property total	→	+	\$68,950.00
63.	Total o	f all property on Schedule A/B. Add line 55 + line 62					\$68,950.00

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 16 of 57

Fill in this info	ormation to i	dentify your case:	:
Debtor 1	Hesham First Name	M Middle Name	Ahmed Last Name
Debtor 2 (Spouse, if filing)	Inji First Name	H. Middle Name	Elsheikh Last Name
(1)			ISTRICT OF ILLINOIS
Case number (if known)			

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions--such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds--may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the Property You Claim as Exempt
Fant II.	i identity the Property fou Claim as exempt

Are you claiming a homestead exemption of more than \$160,375?

1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)						
2.	For any property you list on Schedule A/B th	at you claim as exen	npt, fill in the information b	pelow.			
	of description of the property and line on edule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption			
		Copy the value from Schedule A/B	Check only one box for each exemption				
Brief description: 2015 Nissan Murano (approx. 19000 miles) Line from Schedule A/B:		\$30,000.00	\$0.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c)			
Reg bed set	f description: gular apartment furnishings including lroom set, living room set, dining room from Schedule A/B: 6	\$1,000.00	\$1,000.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)			

No

□ No □ Yes

П

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 17 of 57

Debtor 1 **Hesham M Ahmed** Debtor 2 Inji H. Elsheikh Case number (if known) Part 2: **Additional Page** Brief description of the property and line on Current value of Amount of the Specific laws that allow exemption Schedule A/B that lists this property the portion you exemption you claim own Copy the value from Check only one box for Schedule A/B each exemption Brief description: \$200.00 \$200.00 735 ILCS 5/12-1001(b) $\overline{\mathbf{Q}}$ One ipad, television set and cellular 100% of fair market phones value, up to any applicable statutory Line from Schedule A/B: 7 limit Brief description: \$300.00 \$300.00 735 ILCS 5/12-1001(a), (e) $\overline{\mathbf{Q}}$ Normal and necessary wearing apparel 100% of fair market value, up to any Line from Schedule A/B: 11 applicable statutory limit Brief description: \$500.00 735 ILCS 5/12-1001(b) \$500.00 $\sqrt{}$ Misc. jewelry including 2 rings and 100% of fair market necklace value, up to any Line from Schedule A/B: 12 applicable statutory limit Brief description: \$500.00 \$500.00 735 ILCS 5/12-1001(b) ablaChecking account with Chase Bank 100% of fair market value, up to any Line from Schedule A/B: 17.1 applicable statutory limit \$2,000.00 Brief description: \$2,000.00 735 ILCS 5/12-1001(b) $\overline{\mathbf{V}}$ 100% owner of American Therapy Inc. 100% of fair market П value, up to any Line from Schedule A/B: ___19 applicable statutory limit Brief description: \$950.00 735 ILCS 5/12-1001(b) \$950.00 $\overline{\mathbf{Q}}$ Security deposit on rental unit 100% of fair market value, up to any Line from Schedule A/B: 22 applicable statutory limit Brief description: \$100.00 \$100.00 735 ILCS 5/12-1001(b) \square Physical therapy licenses in Illinois and NY 100% of fair market value, up to any Line from Schedule A/B: 27 applicable statutory limit

Line from Schedule A/B:33	applicable statutory limit				
Brief description: Laptop computer, office furniture, printer Line from Schedule A/B:	\$400.00		\$400.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(d)	

 $\overline{\mathbf{Q}}$

\$2,000.00

100% of fair market

value, up to any

\$2.000.00

Brief description:

Debtor involved in car accident, possible

claim against other party. No injuries

735 ILCS 5/12-1001(b)

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 18 of 57

Debtor 1 Debtor 2	Hesham M Ahmed Inji H. Elsheikh		Case number	Case number (if known)		
Part 2:	Additional Page					
Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption		
		Copy the value from Schedule A/B	Check only one box for each exemption			
Brief description: Tension machines, massage equipment used in business Line from Schedule A/B:40		\$1,000.00	\$1,000.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(d)		

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 19 of 57

	ormation to id							
Debtor 1	Hesham First Name	Middle Name	Ahmed Last Name					
Debtor 2	lnji	Н.	Elsheikh					
(Spouse, if filing)		Middle Name						
United States Ba	nkruptcy Court for	the: NORTHE	RN DISTRICT OF ILLING	ois				
Case number								
(if known)					Check if this is amended filing			
Official Form	106D							
		Nho Have	Claims Secured b	ov Property		12/15		
Scriedule D.	. Creditors v	VIIO Have	Ciairiis Secureu I	by Froperty		12/13		
On the top of any 1. Do any credit ☐ No. Che ☐ Yes. Fill	No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.							
Part 1: Lis	t All Secured (Claims						
claim, list the creditor has a much as poss	2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name. Column Amount Do not value of the creditor's name.				Column B Value of collateral that supports this claim	Column C Unsecured portion If any		
2.1			be the property that	\$32,772.00	\$30,000.00	\$2,772.00		
Nissan Motor A	cceptance		s the claim: oyota Rav4			ΨΣ,112.00		
Creditor's name PO BOX 660366 Number Street)		oyota Kav4					
Dallas	TX 75266-0	Cor	ne date you file, the claim intingent	s: Check all that apply.				
Who owes the del ☐ Debtor 1 only ☑ Debtor 2 only	State ZIP Code bt? Check one.	Dis Nature	 Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) 					
Debtor 1 and D At least one of Check if this of to a communi	the debtors and ar	nother 🔽 Jud	Igment lien from a lawsuit er (including a right to offser rchase Money					
Date debt was inc	•	15 Last 4 (digits of account number					
60 month loan								

Add the dollar value of your entries in Column A on this page. Write that number here:

\$32,772.00

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 20 of 57

Debtor 1 Debtor 2	Hesham M Ahmed Inji H. Elsheikh	Case number (if known)			
Additional Page After listing any entries on sequentially from the previous 2.2 Toyota Motor Credit Creditor's name PO BOX 9786 Number Street			Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
		Describe the property that secures the claim: 2016 Toyota Rav4	<u>\$32,129.00</u> \$30,000.00		
Cedar Rapids IA 52409 City State ZIP Code Who owes the debt? Check one. ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt		As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, medical Judgment lien from a lawsuit) Other (including a right to offset) Purchase Money	s mortgage or secured	car loan)	
	vas incurred <u>01/2016</u>	Last 4 digits of account number	1 5 3 5		
60 month	loan				

Add the dollar value of your entries in Column A on this page. Write that number here:

\$32,129.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$64,901.00

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 21 of 57

FIII IN UNIS	nformation to i	aentiry your ca	ase:				
Debtor 1	Hesham	М	Ahmed				
	First Name	Middle Name	Last Name				
Debtor 2	<u>Inji</u>	H.	Elsheikh	_			
(Spouse, if filing	ig) First Name	Middle Name	Last Name				
United States	Bankruptcy Court fo	r the: NORTHER	N DISTRICT OF ILLINOIS	_			
Case number (if known)						Check if this is a amended filing	an
Official For	m 106E/F						
Schedule	E/F: Creditor	s Who Have	Unsecured Claims				12/15
Do not include If more space is to this page. O	any creditors with s needed, copy the	partially secured Part you need, fil ditional pages, w	and on Schedule G: Executory of claims that are listed in Schedull it out, number the entries in the rite your name and case number the cured Claims	ule D: Cred he boxes o	itors Who H n the left. A	old Claims Secur	ed by Property.
 Do any cre 	editors have priority	unsecured claim	ns against you?				
	editors have priority So to Part 2.	/ unsecured claim	ns against you?				
		/ unsecured claim	ns against you?				
No. G Yes. 2. List all of y claim. For show both more space claim, list the	your priority unsece each claim listed, id priority and nonpriorie is needed for priorihe other creditors in	ured claims. If a centify what type of ty amounts. As me ty unsecured claim Part 3.	creditor has more than one priorit claim it is. If a claim has both pr such as possible, list the claims in ns, fill out the Continuation Page	iority and not alphabetic of Part 1. It	onpriority am al order acco f more than o	ounts, list that clain ording to the creditor	m here and or's name. If
No. G Yes. 2. List all of y claim. For show both more space claim, list the	your priority unsece each claim listed, id priority and nonpriorie is needed for priorihe other creditors in	ured claims. If a centify what type of ty amounts. As me ty unsecured claim Part 3.	creditor has more than one priorit claim it is. If a claim has both pr luch as possible, list the claims in ns, fill out the Continuation Page	iority and not alphabetic of Part 1. It	onpriority am al order acco f more than o ooklet.	ounts, list that clain ording to the creditor one creditor holds a	m here and or's name. If a particular
No. G Yes. 2. List all of y claim. For show both more space claim, list the	your priority unsece each claim listed, id priority and nonpriorie is needed for priorihe other creditors in	ured claims. If a centify what type of ty amounts. As me ty unsecured claim Part 3.	creditor has more than one priorit claim it is. If a claim has both pr luch as possible, list the claims in ns, fill out the Continuation Page	iority and non alphabetic of Part 1. If the contraction by Total	onpriority am al order acco f more than o ooklet. tal claim	ounts, list that clair ording to the creditor holds a Priority amount	m here and or's name. If a particular Nonpriority amount
No. G Yes. 2. List all of y claim. For show both more space claim, list th (For an exp	your priority unsecteach claim listed, id priority and nonpriority is needed for priority the other creditors in planation of each type	ured claims. If a centify what type of ty amounts. As my ty unsecured claim Part 3.	creditor has more than one priorit claim it is. If a claim has both pr such as possible, list the claims in ns, fill out the Continuation Page a instructions for this form in the in	iority and non alphabetic of Part 1. If	onpriority am al order acco f more than o ooklet.	ounts, list that clair ording to the creditor one creditor holds a Priority	m here and or's name. If a particular
No. Go Yes. 2. List all of yes claim. For show both more space claim, list the (For an expanding priority Creditor's No. Go Yes.	your priority unsecteach claim listed, id priority and nonpriority is needed for priorithe other creditors in planation of each type timent of Revenue lame	ured claims. If a centify what type of ty amounts. As my ty unsecured claim Part 3.	creditor has more than one priorit claim it is. If a claim has both produch as possible, list the claims in his, fill out the Continuation Page instructions for this form in the included Last 4 digits of account numbers.	iority and non alphabetic of Part 1. If nestruction b	onpriority am al order acco f more than o ooklet. tal claim	ounts, list that clair ording to the creditor holds a Priority amount	m here and or's name. If a particular Nonpriority amount
No. Go Yes. 2. List all of yes claim. For show both more space claim, list the (For an expand) 2.1 Illinois Depart Priority Creditor's Nankruptcy S	your priority unsecteach claim listed, id priority and nonpriore is needed for priorithe other creditors in colanation of each type timent of Revenue lame ection	ured claims. If a centify what type of ty amounts. As my ty unsecured claim Part 3.	creditor has more than one priorit claim it is. If a claim has both prouch as possible, list the claims in ns, fill out the Continuation Page instructions for this form in the in	iority and non alphabetic of Part 1. If nestruction b Tori	onpriority am al order acco f more than o ooklet. tal claim \$2,500.00	ounts, list that clair ording to the creditor holds a Priority amount \$2,500.00	m here and or's name. If a particular Nonpriority amount
No. Go Yes. 2. List all of yes claim. For show both more space claim, list the (For an expand) 2.1 Illinois Depart Priority Creditor's Nankruptcy S	your priority unsecteach claim listed, id priority and nonpriore is needed for priorithe other creditors in colanation of each type timent of Revenue lame ection	ured claims. If a centify what type of ty amounts. As my ty unsecured claim Part 3.	creditor has more than one prioritical claim it is. If a claim has both private as possible, list the claims in the instructions for this form in the instructions for this form in the instructions for the decount number when was the debt incurred? As of the date you file, the claims.	iority and non alphabetic of Part 1. If nestruction b Tori	onpriority am al order acco f more than o ooklet. tal claim \$2,500.00	ounts, list that clair ording to the creditor holds a Priority amount \$2,500.00	m here and or's name. If a particular Nonpriority amount
No. Go Yes. 2. List all of yes claim. For show both more space claim, list the (For an expanding provided prov	your priority unsecteach claim listed, id priority and nonpriore is needed for priorithe other creditors in planation of each type timent of Revenue lame ection	ured claims. If a centify what type of ity amounts. As my ty unsecured claim Part 3.	creditor has more than one priorit claim it is. If a claim has both prouch as possible, list the claims in ns, fill out the Continuation Page instructions for this form in the in	iority and non alphabetic of Part 1. If nestruction b Tori	onpriority am al order acco f more than o ooklet. tal claim \$2,500.00	ounts, list that clair ording to the creditor holds a Priority amount \$2,500.00	m here and or's name. If a particular Nonpriority amount
No. Go Yes. 2. List all of yes claim. For show both more space claim, list the (For an expanding priority Creditor's No. Go Yes. 2.1 Illinois Departive Triority Creditor's No. Go Yes.	your priority unsecteach claim listed, id priority and nonpriore is needed for priorithe other creditors in colanation of each type timent of Revenue lame ection	ured claims. If a centify what type of ty amounts. As my ty unsecured claim Part 3.	creditor has more than one prioritical claim it is. If a claim has both private has possible, list the claims in the first specific continuation page instructions for this form in the interest and the continuation page. Last 4 digits of account number when was the debt incurred? As of the date you file, the claim contingent	iority and non alphabetic of Part 1. If nestruction b Tori	onpriority am al order acco f more than o ooklet. tal claim \$2,500.00	ounts, list that clair ording to the creditor holds a Priority amount \$2,500.00	m here and or's name. If a particular Nonpriority amount

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 22 of 57

Debtor 1 Debtor 2	Hesham M Ahmed Inji H. Elsheikh			Case number (if known)						
Part 1:	Part 1: Your PRIORITY Unsecured Claims Continuation Page									
After listing previous page	•	n this p	age, number the	m sequentially from the		Tota	al clai	im	Priority amount	Nonpriority amount
2.2	vonuo Sorvi	00			_	\$	34,26	9.00	\$4,269.00	\$0.00
Internal Revenue Service Priority Creditor's Name Centralized Insolvency Operation Number Street P.O. Box 7346			— Last 4 digits of account number 9 7 4 0 When was the debt incurred? 2016 — As of the date you file, the claim is: Check all that apply. ☐ Contingent					– oly.		
Philadelphia PA 19101-7346 City State ZIP Code		19101-7346 ZIP Code	Unliquidated Disputed							
City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes			Type of PRIORITY unsecured of Domestic support obligations	s s you		_		ent		

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 23 of 57

Debtor 1 Debtor 2	Hesham M Ahmed Inji H. Elsheikh	Case number (if known)
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims
4. List al	l of your nonpriority unsecured claims editor has more than one nonpriority unser f claim it is. Do not list claims already incl	claims against you? Submit this form to the court with your other schedules. in the alphabetical order of the creditor who holds each claim. cured claim, list the creditor separately for each claim. For each claim listed, identify what uded in Part 1. If more than one creditor holds a particular claim, list the other creditors in unsecured claims, fill out the Continuation Page of Part 2.
EL PASO City Who incurr Debtor Debtor At least	reditor's Name 181537 Street TX 79998 State ZIP Code red the debt? Check one. 1 only	Sa,620.00 Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Credit Card
4.2 Capital Ori Nonpriority Crip PO BOX 3 Number SALT LAM City Who incurr Debtor Debtor Debtor At least Check	Street KE CITY UT 84130 State ZIP Code red the debt? Check one. 1 only	Last 4 digits of account number 5 9 5 0 When was the debt incurred? As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Credit Card

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 24 of 57

Debtor 1	Hesham M Ahmed		
Debtor 2	Inji H. Elsheikh	Case number (if known)	
Part 2:	Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listin	ng any entries on this page, number the page.	em sequentially from the	Total claim
4.3			\$1,592.00
Capital C	ne Bank USA N.A.	Last 4 digits of account number	
Nonpriority C	Creditor's Name	When was the debt incurred?	
Number	Street	As of the date you file, the claim is: Check all that apply.	
-		_ Contingent	
		☐ Unliquidated ☐ Disputed	
SALT LA			
City Who incur	State ZIP Code red the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	r 1 only	Student loans Obligations origing out of a congretion agreement or diverse	
_	r 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	r 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
_	st one of the debtors and another	☑ Other. Specify	
_	if this claim is for a community debt	Credit Card	
	m subject to offset?		
✓ No ☐ Yes			
4.4			\$1,388.00
	Portfolio Services	Last 4 digits of account number 8 6 8 7	
	Creditor's Name MIT LAKE DR 400	When was the debt incurred?	
Number	Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
		☐ Unliquidated ☐ Disputed	
VALHALI			
City Who incur	State ZIP Code red the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	r 1 only	Student loans Obligations origing out of a constration agreement or diverse	
Debtor	r 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	r 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
_	st one of the debtors and another	☑ Other. Specify	
_	t if this claim is for a community debt	Collecting for - Citibank	
	m subject to offset?		
✓ No ☐ Yes			
☐ Yes			

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 25 of 57

Debtor 1 Debtor 2	Hesham M Ahmed Inji H. Elsheikh	Case number (if known)	
Dort 2	Vour MONDDIODITY Unaccu		
Part 2:	Tour NONPRIORITY Unsect	red Claims Continuation Page	
After listin	ng any entries on this page, number the page.	em sequentially from the	Total claim
4.5			\$321.00
Cavalry F	Portfolio Services	Last 4 digits of account number	-
	Creditor's Name	When was the debt incurred?	
Number	MIT LAKE DR 400 Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
		Unliquidated	
VALHALL	_A NY 10595	Disputed	
City	State ZIP Code	Type of NONPRIORITY unsecured claim:	
	red the debt? Check one.	Student loans	
	· 1 only · 2 only	Obligations arising out of a separation agreement or divorce	
	1 and Debtor 2 only	that you did not report as priority claims	
ك	st one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check	if this claim is for a community debt	✓ Other. Specify Collecting for - Banking account	
Is the clair	m subject to offset?		
☑ No	·		
Yes			
4.6			
			\$3,184.00
	TY BANK/CARSONS Creditor's Name	Last 4 digits of account number	
PO BOX		When was the debt incurred?	
Number	Street	As of the date you file, the claim is: Check all that apply.	
		— ☐ Unliquidated — ☐ Disputed	
COLUMB			
City Who incur	State ZIP Code red the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	· 1 only	Student loans	
	· 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor	1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At leas	st one of the debtors and another	Other. Specify	
☐ Check	if this claim is for a community debt	Credit Card	
Is the clair	m subject to offset?		
☑ No			
☐ Yes			

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 26 of 57

Debtor 1 Hesham M Ahmed Debtor 2 Inji H. Elsheikh	O	
ilji II. Lisheikii	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.7		\$372.00
Comenity Bank/Catherines	Last 4 digits of account number	
Nonpriority Creditor's Name PO BOX 182789	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	☐ Unliquidated ☐ Disputed	
Columbus OH 43218-2789 City State ZIP Code		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
☐ Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Credit Card	
Is the claim subject to offset?	orean dard	
✓ No		
Yes		
4.8		\$3,127.00
Discover Bank	Last 4 digits of account number	φ3,127.00
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 15316 Number Street	As of the date you file, the claim is: Check all that apply.	
Wilmington, DE-1985-05316	_ Contingent	
	Unliquidated	
	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No ☐ Yes		

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 27 of 57

Debtor 1 Debtor 2	Hesham M Ahmed Inji H. Elsheikh	Case number (if known)	
Part 2:	Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listin	ng any entries on this page, number the page.	m sequentially from the	Total claim
4.9			\$542.00
First Nati	ional Bank	Last 4 digits of account number	
Nonpriority C 500 E. 60	Creditor's Name	When was the debt incurred?	
Number	Street	As of the date you file, the claim is: Check all that apply.	
		_ Contingent	
		☐ Unliquidated ☐ Disputed	
Sioux Fal			
City Who incur	State ZIP Code Tred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	1 only	Student loans Obligations origing out of a congretion agreement or diverse	
Debtor	r 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
ب	1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
ш	st one of the debtors and another	☑ Other. Specify	
☐ Check	if this claim is for a community debt	Credit Card	
	m subject to offset?		
✓ No			
Yes			
4.10			\$156.00
First Nati	ional Bank of Omaha	Last 4 digits of account number 0 3 7 8	Ψ100.00
	Creditor's Name	When was the debt incurred?	
1620 Dod Number	Ige Street Street	As of the date you file, the claim is: Check all that apply.	
Stop Cod		Contingent	
		Unliquidated	
Omoho	NE 68197	Disputed	
Omaha City	State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incur	red the debt? Check one.	Student loans	
ш	1 only	Obligations arising out of a separation agreement or divorce	
= ~	r 2 only	that you did not report as priority claims	
	r 1 and Debtor 2 only st one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
	t if this claim is for a community debt	✓ Other. Specify	
_	•	Credit Card	
No No	m subject to offset?		
Yes			

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 28 of 57

Debtor 1 Debtor 2	Hesham M Al		Ī		
Debiol 2	Inji H. Elsheil	KN		Case number (if known)	
Part 2:	Your NONI	PRIO	RITY Unsecu	red Claims Continuation Page	
After listin	•	this p	age, number the	m sequentially from the	Total claim
4.11					\$490.00
First Pre	mier Bank			Last 4 digits of account number	
Nonpriority C PO Box 5	Creditor's Name			When was the debt incurred?	
Number	Street			As of the date you file, the claim is: Check all that apply.	
				_ Contingent	
				Unliquidated Disputed	
Sioux Fal		SD	57117-5524		
City Who incur		State Check	ZIP Code	Type of NONPRIORITY unsecured claim:	
	r 1 only	000		Student loans Obligations arising out of a congration agreement or diverse	
	r 2 only			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	r 1 and Debtor 2 or st one of the debto		Lanathar	Debts to pension or profit-sharing plans, and other similar debts	
_				Other. Specify	
	c if this claim is fo		minumity debt	Credit Card	
No No	m subject to offse	ar.			
Yes					
4.10					
4.12					\$327.00
	mier Bank Creditor's Name			Last 4 digits of account number	
PO Box 5				When was the debt incurred?	
Number	Street			As of the date you file, the claim is: Check all that apply.	
				Contingent Unliquidated	
O: F.			57447 5504	Disputed	
Sioux Fal		SD State	57117-5524 ZIP Code	Type of NONERIORITY uncestured eleims	
		Check		Type of NONPRIORITY unsecured claim: ☐ Student loans	
ш	r 1 only			Obligations arising out of a separation agreement or divorce	
느	r 2 only			that you did not report as priority claims	
	r 1 and Debtor 2 or st one of the debto		Lanother	Debts to pension or profit-sharing plans, and other similar debts	
_	c if this claim is fo			Other. Specify	
_	m subject to offse		minumity debt	Credit Card	
No No	iii subject to offse	at i			
Yes					

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 29 of 57

Debtor 1 Debtor 2	Hesham M Ahmed Inji H. Elsheikh	Case number (if known)	
Part 2:	Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listin	g any entries on this page, number the page.	em sequentially from the	Total claim
4.13			\$656.00
	ollway Authority	Last 4 digits of account number	· ·
	reditor's Name lations Administration Center	When was the debt incurred?	
Number 2700 Ogd	Street	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	
Downers	Grove II 60515	Disputed	
Downers Grove City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes		Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Tollway Violations	
4.14			\$357.00
	Business Bureau Creditor's Name	Last 4 digits of account number2463	
PO BOX		When was the debt incurred?	
Number	Street	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	
PARK RII		Disputed	
Debtor Debtor Debtor Debtor At leas Check	State ZIP Code red the debt? Check one. 1 only 2 only 1 and Debtor 2 only st one of the debtors and another if this claim is for a community debt m subject to offset?	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for - AEGIS AMBULATORY	

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 30 of 57

Debtor 1 Debtor 2	Hesham M Ahmed Inji H. Elsheikh	Case number (if known)			
Part 2:	Your NONPRIORITY Unsecu	red Claims Continuation Page			
	fter listing any entries on this page, number them sequentially from the revious page. Total claim				
Nonpriority C 10705 S. Number SOUTH J City Who incur Debtor Debtor At leas	Bank Corp. Creditor's Name JORDAN GTWY STE 200 Street JORDAN UT 84095 State ZIP Code rred the debt? Check one. r 1 only r 2 only r 1 and Debtor 2 only st one of the debtors and another k if this claim is for a community debt m subject to offset?	Last 4 digits of account number 7 1 8 4 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	\$2,207.00		
Nonpriority C 8875 Aer Number	Credit Management Creditor's Name o Dr Ste 200 Street jo, CA-9212-32255	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	\$373.00		
Debtor Debtor Debtor Debtor At leas	State ZIP Code rred the debt? Check one. r 1 only r 2 only r 1 and Debtor 2 only st one of the debtors and another c if this claim is for a community debt m subject to offset?	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Collecting for - Retail account			

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 31 of 57

Debtor 1 Debtor 2	Hesham M Ahmed Inji H. Elsheikh	Case number (if known)	
Part 2:	Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing previous pa	g any entries on this page, number the age.	m sequentially from the	Total claim \$10,910.00
PO BOX 1	reditor's Name 010 Street	Last 4 digits of account number 1 3 7 3 When was the debt incurred? As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated	
Debtor Debtor Debtor At least Check	State ZIP Code ed the debt? Check one. 1 only	Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Note Loan	

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 32 of 57

Debtor 1 Debtor 2	Hesham M Ahmed Inji H. Elsheikh		Case number (if known)			
Part 3:	List Others to Be	Notified Abou	out a Debt That You Already Listed			
For e credi debts	example, if a collection agitor in Parts 1 or 2, then I	gency is trying to dist the collection at 1 or 2, list the add	fied about your bankruptcy, for a debt that you already listed in Parts 1 or 2. collect from you for a debt you owe to someone else, list the original agency here. Similarly, if you have more than one creditor for any of the itional creditors here. If you do not have additional parties to be notified for hit this page.			
Blitt & G	aines		On which entry in Part 1 or Part 2 did you list the original creditor?			
Name 661 Glen	nn Ave		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims			
Number	Street		Collecting for Discover Part 2: Creditors with Nonpriority Unsecured Claims			
Wheeling City	g IL State	60090 ZIP Code	— Last 4 digits of account number <u>6</u> <u>8</u> <u>1</u> <u>5</u> —			
	erica Bank & Trust		On which entry in Part 1 or Part 2 did you list the original creditor?			
Name PO BOX	400		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims			
Number	Street		Charged off account Part 2: Creditors with Nonpriority Unsecured Claims			
Dixon City	MO State	65459-0400 ZIP Code	— Last 4 digits of account number			
Nissan N	Notor Acceptance		On which entry in Part 1 or Part 2 did you list the original creditor?			
Name	-					
PO BOX Number	Street		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Vehicle Deficiency Part 2: Creditors with Nonpriority Unsecured Claims			
Dallas	TX	75266-0366	— Last 4 digits of account number			
City	State	ZIP Code	_			
	Motor Acceptance		On which entry in Part 1 or Part 2 did you list the original creditor?			
Name PO BOX	660366		Line of (Check one):			
Number	Street		Vehicle Deficiency Part 2: Creditors with Nonpriority Unsecured Claims			
Delles	TV	75266 0266	— Last 4 digits of account number <u>4</u> <u>3</u> <u>5</u> <u>8</u>			
Dallas City	TX State	75266-0366 ZIP Code	_			
-						

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 33 of 57

Deptor 1	Hesnam M Anmed	
Debtor 2	Inji H. Elsheikh	Case number (if known)
	_	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$0.00
nom rait i	6b.	Taxes and certain other debts you owe the government	6b.	\$6,769.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. -	\$0.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$6,769.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	^{6i.} -	\$30,072.00
	6j.	Total. Add lines 6f through 6i.	6j.	\$30,072.00

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 34 of 57

Fill in this inf	ormation to iden			
Debtor 1	Hesham	M	Ahmed	
	First Name	Middle Name	Last Name	
Debtor 2	<u>Inji</u>	Н.	Elsheikh	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the			
Case number				Check if this is an
(if known)				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 35 of 57

					_	
F	ill in this inf	ormation to ide	entify your case	:		
D	ebtor 1	Hesham	М	Ahmed	1	
		First Name	Middle Name	Last Name		
_	ebtor 2	Inji	H.	Elsheikh		
(S	Spouse, if filing)	First Name	Middle Name	Last Name		
U	nited States Bar	nkruptcy Court for t	he: NORTHERN D	ISTRICT OF ILLINOIS		
C	ase number					
_	known)				Check if this is an amended filing	
Of	ficial Form	106H				
Sc	hedule H	Your Codel	ntors			12
<u> </u>	nicadic II.	Tour oouci	31013			
two nee	married peopleded, copy the	le are filing togeth Additional Page, f	er, both are equally ill it out, and numbe	responsible for supplying co er the entries in the boxes on	e as complete and accurate as possible. If prect information. If more space is the left. Attach the Additional Page to this wn). Answer every question.	
1.	Do you have	any codebtors?	(If you are filing a jo	int case, do not list either spou	se as a codebtor.)	
	√ No					

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3.

Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use

Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Yes

☐ Yes

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 36 of 57

Fill in this inform	nation to identify	y your case:				
Debtor 1	Hesham	М	Ahmed			
	First Name	Middle Name	Last Name	Che	eck if this is:	
Debtor 2	lnji	Н.	Elsheikh		An amended filing	
(Spouse, if filing)	First Name	Middle Name	Last Name		7 th amondod ming	
United States Bankruptcy Court for the:		NORTHERN DISTRICT OF ILLINOIS		_ 🗆	A supplement showing postpetition chapter 13 income as of the following date:	
Case number					3	
(if known)					MM / DD / YYYY	
					WWW, 55, 1111	

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1:	Describe	Employment
Fill in v		-n4

1.	Fill in your employment information.		Debtor 1		Debtor 2 or non-fili	ing spouse
	If you have more than one job, attach a separate page with information about	Employment status	✓ Employed✓ Not employed	I	☐ Employed✓ Not employed	
	additional employers.	Occupation	Physical Therap			
	Include part-time, seasonal, or self-employed work.	Employer's name	American Thera	ıpy, Inc.		
	Occupation may include student or homemaker, if it	Employer's address	10416 S. Menar	d Ave.	Number Street	
	applies.					
			Oak Lawn	IL 60453	_	
			City	State Zip Code	City	State Zip Code
		How long employed th	,	·		

Part 2: **Give Details About Monthly Income**

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

			For Debtor 1	For Debtor 2 or non-filing spouse
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$0.00	\$0.00
3.	Estimate and list monthly overtime pay.	3. 🛊	\$0.00	\$0.00
4.	Calculate gross income. Add line 2 + line 3.	4.	\$0.00	\$0.00

Official Form 106I Schedule I: Your Income page 1

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 37 of 57

Debtor 1 **Hesham M Ahmed** Debtor 2 Inji H. Elsheikh Case number (if known) For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here \$0.00 \$0.00 List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions \$0.00 \$0.00 5a 5b. Mandatory contributions for retirement plans \$0.00 \$0.00 5b. \$0.00 \$0.00 5c. Voluntary contributions for retirement plans 5c. \$0.00 \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 \$0.00 5e. Insurance 5e. \$0.00 \$0.00 **Domestic support obligations** 5f. 5g. Union dues \$0.00 \$0.00 5g 5h. Other deductions. \$0.00 \$0.00 5h.+ Specify: Add lines 5a + 5b + 5c + 5d + 5e + 5f + Add the payroll deductions. 6. \$0.00 \$0.00 5g + 5h.Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$0.00 \$0.00 List all other income regularly received: 8a. Net income from rental property and from operating a 8a. \$5,524.00 \$0.00 business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8b. \$0.00 \$0.00 8c. Family support payments that you, a non-filing spouse, or a 8c \$0.00 \$0.00 dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation b8 \$0.00 \$0.00 8e. Social Security 8e. \$0.00 \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any noncash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. \$0.00 Specify: \$0.00 8g. Pension or retirement income 8g. \$0.00 \$0.00 8h. Other monthly income. 8h. 🚜 Specify: \$0.00 \$0.00 **Add all other income.** Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 9. \$5,524.00 \$0.00 10. Calculate monthly income. Add line 7 + line 9. \$5,524.00 \$0.00 \$5.524.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. \$0.00 Specify: 11. 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly 12. \$5,524.00 income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, Combined if it applies. monthly income Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 38 of 57

			lesham I nji H. Els	M Ahmed heikh	Case number (if known)	
13.	Do y	ou ex	xpect an	increase or decrease within the year after you file this form?		
		No.		None.		
		Yes.	Explain:			

Official Form 106l Schedule I: Your Income page 3

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 39 of 57

Debtor 1 Debtor 2	Hesham M Ahmed Inji H. Elsheikh		Case number (if known)	
8a. Attached	Statement (Debtor 1)			
		American Therapy Inc.		
Gross Mon	thly Income:			\$7,000.00
Expense		Category	Amount	
Accounting		Accounting	\$73.00	
Insurance		Insurance	\$398.00	
Office supp	lies	Office Expenses	\$100.00	
Postage		Postage	\$50.00	
Supplies		Supplies	\$100.00	
Phone expe	enses	Utilities	\$280.00	
Utilities		Utilities	\$25.00	
Meals		Meals	\$100.00	
Vehicle Exp	enses	Vehicle Expenses	\$200.00	
-	d Dry Cleaning	Laundry/dry cleaning	\$150.00	
Total Mont	hly Expenses			\$1,476.00
Net Monthl	y Income:			\$5,524.00

Official Form 106l Schedule I: Your Income page 4

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 40 of 57

F	ill in this infor	mation to ident	ify your case:			Cho	ck if this	io	
	Debtor 1	Hesham	М	Ahme	ed			ns. ended filing	
		First Name	Middle Name	Last Na	me			ement showing	
	Debtor 2 (Spouse, if filing)	Inji First Name	H. Middle Name	Elshe Last Na			following	13 expenses as g date:	s of the
	United States Banl	kruptcy Court for the	: NORTHERN DI	STRICT O	ILLINOIS		MM / DI	D / YYYY	_
	Case number (if known)						, 2.	_,,	
Of	ficial Form 1	06J							
So	hedule J: Y	our Expense	es .						12/15
cor	rect information. me and case numl	If more space is n	ole. If two married pe eeded, attach anothe swer every question. ehold	er sheet to t		-	-		
1.	Is this a joint ca	se?							
2.	_ N	Debtor 2 live in a s o es. Debtor 2 must f	eparate household? lle Official Form 106J-		s for Separate House	hold of	f Debtor 2	2.	
	Do not list Debto Debtor 2.	. 5	Yes. Fill out this inf for each dependent		Dependent's relati		p to	Dependent's age	Does dependent live with you?
	Do not state the chames.	dependents'							Yes No Yes No Yes No Yes No Yes No No No No No
3.	Do your expens expenses of peo yourself and you	ople other than	✓ No ☐ Yes						Yes
P	art 2: Estim	nate Your Ongo	ing Monthly Exp	enses					
to ı	eport expenses a		kruptcy filing date u e bankruptcy is filed	-	_	-			
			h government assis n Schedule I: Your Ir	-				Your expens	es
4.			enses for your resid any rent for the grour				4	1	\$950.00
	If not included in	n line 4:	-						
	4a. Real estate	taxes					4	ła	
	4b. Property, ho	omeowner's, or rente	er's insurance				4	łb	
	4c. Home main	tenance, repair, and	upkeep expenses				4	łc	
	4d. Homeowner	r's association or co	ndominium dues				4	ld.	

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 41 of 57

	tor 1 Hesham M Ahmed tor 2 Inji H. Elsheikh Case number	(if known)
		Your expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5
6.	Utilities:	
	6a. Electricity, heat, natural gas	6a. \$250.00
	6b. Water, sewer, garbage collection	6b.
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$250.0 0
	6d. Other. Specify:	6d.
7.	Food and housekeeping supplies	7. \$700.00
8.	Childcare and children's education costs	8.
9.	Clothing, laundry, and dry cleaning	9. \$50.0 0
10.	Personal care products and services	10. \$250.00
11.	Medical and dental expenses (See continuation sheet(s) for details)	11. \$880.0 0
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$250.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.
14.	Charitable contributions and religious donations	14.
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.	
	15a. Life insurance	15a.
	15b. Health insurance	15b.
	15c. Vehicle insurance	15c. \$150.00
	15d. Other insurance. Specify:	15d.
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.
17.	Installment or lease payments:	
	17a. Car payments for Vehicle 1 Nissan payment	17a. \$903.0 0
	17b. Car payments for Vehicle 2 Toyota Payment	17b. \$997.0 0
	17c. Other. Specify: DUI machine for car	17c. \$120.0 0
	17d. Other. Specify:	17d.
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.
19.	Other payments you make to support others who do not live with you. Specify:	19.

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 42 of 57

	tor 1 tor 2	Hesham M Ahmed Inji H. Elsheikh	Case number (if knowr	n)
20.		real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.		
	20a.	Mortgages on other property	20a.	
	20b.	Real estate taxes	20b.	
	20c.	Property, homeowner's, or renter's insurance	20c.	
	20d.	Maintenance, repair, and upkeep expenses	20d.	
	20e.	Homeowner's association or condominium dues	20e.	
21.	Other	. Specify:	21.	·
22.	Calcu	late your monthly expenses.	_	
	22a.	Add lines 4 through 21.	22a.	\$5,750.00
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	2. 22b.	
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c.	\$5,750.00
23.	Calcu	late your monthly net income.		
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$5,524.00
	23b.	Copy your monthly expenses from line 22c above.	23b. -	\$5,750.00
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c.	(\$226.00)
24.	Do yo	ou expect an increase or decrease in your expenses within the year after yo	ou file this form?	
		xample, do you expect to finish paying for your car loan within the year or do you ent to increase or decrease because of a modification to the terms of your morto	. ,	
	=	No. Yes. Explain here: Debtor are searching for an adequate health insurance plan. Cexpenses due to health conditions and age. Plans cost between		

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 43 of 57

Debtor 1 Debtor 2	Hesham M Ahmed Inji H. Elsheikh	Case number (if know	n)
	cal and dental (details): air prescription		\$380.00
Auva	iii prescription		Ψ300.00
Doct	or visits, RX, etc.	_	\$500.00
		Total:	\$880.00

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 44 of 57

Fill in this inf	ormation to i	dentify your case	:		
Debtor 1	Hesham	М	Ahmed		
	First Name	Middle Name	Last Name		
Debtor 2	<u>Inji</u>	H.	Elsheikh		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court fo	or the: NORTHERN D	ISTRICT OF ILLINOIS	_	
Case number					☐ Check i
(if known)					amende

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	rect information. Fill out all of your schedules first; then complete the information on this form. If you are filin edules after you file your original forms, you must fill out a new Summary and check the box at the top of this	
P	art 1: Summarize Your Assets	
		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	
	1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	. \$68,950.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$68,950.00
P	art 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$64,901.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$6,769.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$30,072.00
	Your total liabilities	\$101,742.00
Р	art 3: Summarize Your Income and Expenses	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$5,524.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$5,750.00

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 45 of 57

	tor 1 tor 2	Hesham M Ahmed Inji H. Elsheikh Case	e number (if known)	
Pa	art 4:	Answer These Questions for Administrative and Statistical I	Records	
ô.	Are y	ou filing for bankruptcy under Chapters 7, 11, or 13?		
	ш	No. You have nothing to report on this part of the form. Check this box and submit es	this form to the court with yo	ur other schedules.
7.	What	kind of debt do you have?		
	كا	Your debts are primarily consumer debts. Consumer debts are those "incurred lamily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical		a personal,
		Your debts are not primarily consumer debts. You have nothing to report on this his form to the court with your other schedules.	s part of the form. Check this	box and submit
3.		the Statement of Your Current Monthly Income: Copy your total current monthly all Form 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	y income from	\$5,877.94
Э.	Сору	the following special categories of claims from Part 4, line 6 of Schedule E/F.	:	
			Total claim	
	From	Part 4 on Schedule E/F, copy the following:		
	9a. E	Domestic support obligations. (Copy line 6a.)	\$0.0	<u>0</u>
	9b. T	Faxes and certain other debts you owe the government. (Copy line 6b.)	\$6,769.0	<u>0</u>
	9c. C	Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.0	0
	9d S	Student loans (Copy line 6f.)	\$0.0	0

9e. Obligations arising out of a separation agreement or divorce that you did not report as

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

\$0.00

\$0.00

\$6,769.00

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 46 of 57

Fill in this inf				
Debtor 1	Hesham First Name	M Middle Name	Ahmed	
			Last Name	
Debtor 2 (Spouse, if filing)	Inji First Name	H. Middle Name	Elsheikh Last Name	
(Opodoo, ii iiiiig)	,	·····auio · ··ai···o	2001.10110	
United States Ba	ankruptcy Court fo	r the: NORTHERN	DISTRICT OF ILLINOIS	
Case number				☐ Check if this is an
(if known)				amended filing
Official Form	106Dec			-
Declaration	About an I	ndividual Deb	otor's Schedules	12/1!
·			schoolules or amended school	
You must file this concealing prope \$250,000, or impr	form whenever	you file bankruptcy money or property	schedules or amended schedu	les. Making a false statement, ankruptcy case can result in fines up to
You must file this concealing prope \$250,000, or impr	form whenever erty, or obtaining isonment for up gn Below	you file bankruptcy money or property to 20 years, or both	schedules or amended schedules by fraud in connection with a b	les. Making a false statement, ankruptcy case can result in fines up to and 3571.
You must file this concealing prope \$250,000, or impr	form whenever erty, or obtaining isonment for up gn Below	you file bankruptcy money or property to 20 years, or both	schedules or amended schedu by fraud in connection with a k . 18 U.S.C. §§ 152, 1341, 1519,	les. Making a false statement, ankruptcy case can result in fines up to and 3571.
You must file this concealing prope \$250,000, or impr	s form whenever erty, or obtaining isonment for up gn Below or agree to pay s	you file bankruptcy money or property to 20 years, or both	schedules or amended schedules or amended schedules by fraud in connection with a karantee in the second schedules of the seco	les. Making a false statement, ankruptcy case can result in fines up to and 3571. t bankruptcy forms?
You must file this concealing prope \$250,000, or impr	form whenever erty, or obtaining isonment for up gn Below	you file bankruptcy money or property to 20 years, or both	schedules or amended schedu by fraud in connection with a k . 18 U.S.C. §§ 152, 1341, 1519,	les. Making a false statement, ankruptcy case can result in fines up to and 3571.

Hesham M Ahmed, Debtor 1

Date <u>12/23/2017</u> MM / DD / YYYY X /s/ Inji H. Elsheikh

Inji H. Elsheikh, Debtor 2

Date <u>12/23/2017</u> MM / DD / YYYY Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 47 of 57

F	ill in this inf	ormation to i	dentify your case	:		
	ebtor 1	Hesham First Name	M Middle Name	Ahmed Last Name		
	ebtor 2 Spouse, if filing)	Inji First Name	H. Middle Name	Elsheikh Last Name		
U	nited States Ba	nkruptcy Court fo	r the: NORTHERN D	ISTRICT OF ILLINOIS		
_	ase number f known)				Check if this is an amended filing	
Of	fficial Form	107				
St	atement o	of Financial	Affairs for Ind	lividuals Filing for Ban	kruptcy	04/16
cor you	rrect informatiour name and ca	on. If more spac ase number (if ki	e is needed, attach a nown). Answer every	separate sheet to this form. On the	are equally responsible for supplying he top of any additional pages, write	
1.		current marital	status?			
	✓ Married ✓ Not married	ed				
2.	Not marrie During the la	st 3 years, have		other than where you live now?	e now.	

Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 48 of 57

Debtor 1 Debtor 2	Hesham M Ahmed Inji H. Elsheikh		Case nur	mber (if known)	
Part 2:	Explain the Sources o	f Your Income			
Fill in	you have any income from emplo the total amount of income you re u are filing a joint case and you ha	eceived from all jobs and all bus	inesses, including par	t-time activities.	endar years?
	No /es. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions
	uary 1 of the current year until ou filed for bankruptcy:	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$60,071.84	Wages, commissions, bonuses, tips□ Operating a business	
	st calendar year: 1 to December 31, 2016)	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$48,187.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	
For the ca	alendar year before that:	✓ Wages, commissions,	\$46,476.00	☐ Wages, commissions,	
(January 1	1 to December 31, 2015)	bonuses, tips Operating a business		bonuses, tips Operating a business	
Include unemand g Debte List e	you receive any other income du de income regardless of whether to apployment; and other public benefing gambling and lottery winnings. If your 1. each source and the gross income	hat income is taxable. Example t payments; pensions; rental inc ou are in a joint case and you h	es of other income are come; interest; dividen ave income that you re	ds; money collected from laveceived together, list it only constitution	vsuits; royalties;

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 49 of 57

		Hesham M Ahmed Inji H. Elsheikh Case number (if known)
P	art 3:	List Certain Payments You Made Before You Filed for Bankruptcy
6.	Are eith	er Debtor 1's or Debtor 2's debts primarily consumer debts?
	□ No.	Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."
		During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?
		□ No. Go to line 7.
		Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.
		* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.
	✓ Yes	Debtor 1 or Debtor 2 or both have primarily consumer debts.
		During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?
		✓ No. Go to line 7.
		Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.
7.	Insiders corporat agent, ir	year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; ions of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations child support and alimony.
	✓ No ☐ Yes	. List all payments to an insider.
8.		year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that
	Include	payments on debts guaranteed or cosigned by an insider.
	✓ No ☐ Yes	. List all payments that benefited an insider.

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 50 of 57

	otor 1 otor 2	Hesham M Ahmed Inji H. Elsheikh		Case number	(if known)		
P	art 4:	Identify Legal Act	ions, Repossessions, ar	nd Foreclosures			
9.	List all s	•	rsonal injury cases, small claim	rty in any lawsuit, court action, as actions, divorces, collection su		_	stody
	□ No ☑ Yes	. Fill in the details.					
Cas	se title		Nature of the case	Court or agency		Status of th	e case
Dis	cover B	ank v. Elsheikh Inji	Contract lawsuit	Circuit Court of	Cook County	—— ⋈ Р	ending
				Court Name		V	orianig
				Number Street		C	n appeal
Cas	se numbe	r 2017M5006815		Number Street		ПС	Concluded
			-			_	
				City	State ZIP C	Code	
				- 3			
11.	Check a No. Yes Within 9	•	elow.	itor, including a bank or financia ecause you owed a debt?	al institution, set o	off any	
	✓ No ☐ Yes	s. Fill in the details.					
12.		•	or bankruptcy, was any of you ceiver, a custodian, or anothe	ur property in the possession of r official?	an assignee for the	he benefit of	
	✓ No ☐ Yes						
P	art 5:	List Certain Gifts	and Contributions				
13.	Within	2 years before you filed	for bankruptcy, did you give a	any gifts with a total value of mo	ore than \$600 per	person?	
	✓ No ☐ Yes	s. Fill in the details for each	ch gift.				
14.		2 years before you filed charity?	for bankruptcy, did you give a	any gifts or contributions with a	total value of mor	e than \$600	
	✓ No ☐ Yes	. Fill in the details for eac	ch gift or contribution.				

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 51 of 57

Debtor 1 Debtor 2	Hesham M Inji H. Elshe		d	Case number (if kn	nown)	
Part 6:	List Cert	ain Lo	osses			
	n 1 year before disaster, or ga	-		ptcy or since you filed for bankruptcy, did you lose anyt	hing because of th	neft, fire,
□ N	o es. Fill in the de	etails.				
Describe t the loss o	he property yo ccurred	u lost a	and how	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss 11/27/17	Value of property lost \$2,000.00
•	potential car a g from car acc					
Part 7:	List Cert	ain Pa	ayments or	Transfers		
Badillo La	es. Fill in the de	etails.		Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who 8745 W. H	Was Paid Higgins Rd.				12/12/2017	\$1,200.00
Number S Suite 110				_		
Chicago City		IL State	60631 ZIP Code	_		
Email or web	osite address			_		
Person Who	Made the Paymen	t, if Not	You	_		
	-	-		ptcy, did you or anyone else acting on your behalf pay o		perty to
Do no	ot include any pa	yment	or transfer tha	t you listed on line 16.		
☑ N	o es. Fill in the de	etails.				

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 52 of 57

	otor 1 otor 2	Hesham M Ahmed Inji H. Elsheikh	Case number (if known)
18.		2 years before you filed for bankruptcy, did you sell, trade, or otherwis ty transferred in the ordinary course of your business or financial affai	
		both outright transfers and transfers made as security (such as granting of include gifts and transfers that you have already listed on this statement.	a security interest or mortgage on your property).
	✓ No	s. Fill in the details.	
19.		10 years before you filed for bankruptcy, did you transfer any property a beneficiary? (These are often called asset-protection devices.)	to a self-settled trust or similar device of which
	✓ No ☐ Yes	s. Fill in the details.	
Pa	art 8:	List Certain Financial Accounts, Instruments, Safe Dep	osit Boxes, and Storage Units
20.		1 year before you filed for bankruptcy, were any financial accounts or , closed, sold, moved, or transferred?	instruments held in your name, or for your
		checking, savings, money market, or other financial accounts; certificates, pension funds, cooperatives, associations, and other financial institutions.	
	✓ No ☐ Yes	s. Fill in the details.	
21.	-	now have, or did you have within 1 year before you filed for bankruptourities, cash, or other valuables?	cy, any safe deposit box or other depository
	✓ No ☐ Yes	s. Fill in the details.	
22.	Have ye	ou stored property in a storage unit or place other than your home with	nin 1 year before you filed for bankruptcy?
	☐ Yes	s. Fill in the details.	
Pa	art 9:	Identify Property You Hold or Control for Someone Else	
23.	-	hold or control any property that someone else owns? Include any prin trust for someone.	operty you borrowed from, are storing for,
	✓ No ☐ Yes	s. Fill in the details.	

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 53 of 57

	otor 1 otor 2	Hesham M A Inji H. Elshei				c	ase number	r (if know	n) _						
Р	art 10:	Give Deta	ils About E	nvironmenta	I Information	on									
For	the purp	ose of Part 10	, the following	definitions app	oly:										
ı	hazardoı	ıs or toxic sub	stance, waste	s, or material ir	to the air, lan	egulation concerr nd, soil, surface v substances, was	vater, grou	ndwater					s of		
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.														
				an environmen tant, contamina		s as a hazardous item.	s waste, ha	zardous	sub	stan	ce, to	oxic			
Rep	oort all n	otices, release	s, and procee	dings that you l	now about, r	egardless of whe	en they occ	urred.							
24.	Has an	y governmenta	Il unit notified	you that you m	ay be liable o	r potentially liab	le under or	in violat	ion (of an	env	ironm	ental		
	☑ No	. Fill in the det	ails.												
25.	 Have you notified any governmental unit of any release of hazardous material? ✓ No ✓ Yes. Fill in the details. 														
26.	Have you	ou been a part	y in any judici	al or administra	tive proceedi	ng under any en	vironmenta	ıl law? I	nclu	de s	ettlei	ments	and		
	✓ No ☐ Yes	. Fill in the det	ails.												
Р	art 11:	Give Deta	ils About Y	our Business	or Connec	ctions to Any	Business	5							
27.	Within busines	-	you filed for b	oankruptcy, did	you own a bu	isiness or have a	any of the fo	ollowing	con	nect	ions	to an	y		
	 A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership ✓ An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation 														
	_	None of the all that. Check all that		Go to Part 12. and fill in the det	ails below for e	each business.									
		Γherapy, Inc.		Describe the Physical Th	nature of the erapy	business		er Identi nclude S					nber or	ITIN.	
	iness Nam						EIN: 2	0 -	5_	3_	0_	1	<u>1</u> <u>1</u>	2	_
Num		enard Ave. eet		Name of according Stephen H.	ountant or bo	okkeeper	Dates h	usiness	ovic	tad					
				– Glepnen A.	IIIAOII					_	•_	nrec	ont		
Oal	k Lawn	IL	60453				From _	2007		- '	°_	pres	HIIT		
City	. = 41111	State		_											

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 54 of 57

	otor 1 otor 2	Hesham M Ahmed Inji H. Elsheikh		Case number (if known)
28.		2 years before you filed for bancial institutions, creditors, or		tatement to anyone about your business? Include
	✓ No ☐ Yes	s. Fill in the details below.		
Р	art 12:	Sign Below		
pro or k	perty by both. 18 /s/ Hesh	fraud in connection with a ba U.S.C. §§ 152, 1341, 1519, and nam M Ahmed	nkruptcy case can result in fines up d 3571. X <i>[</i> s/ Inji H. Elsheikh	nt, concealing property, or obtaining money or to \$250,000, or imprisonment for up to 20 years,
		M Ahmed, Debtor 1	Inji H. Elsheikh, Debt Date 12/23/201	
Did ☑ □ Did	No Yes you pay			lividuals Filing for Bankruptcy (Official Form 107)?
	No Yes. Na	ame of person		Attach the Bankruptcy Petition Preparer's Notice,
_				Declaration, and Signature (Official Form 119).

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 55 of 57

Fill in this information to identify your case:						
Debtor 1	Hesham	М	Ahmed			
	First Name	Middle Name	Last Name			
Debtor 2	<u>Inji</u>	н.	Elsheikh			
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court for	the: NORTHERN D	ISTRICT OF ILLINOIS			
Case number						
(if known)						

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Hold Secured Claims

1.	For any creditors that you listed in Part 1 of Schedule D: Creditors Who Hold Claims Secured by Property (Official Form 106D), fill in the information below.										
	Identify the cre	editor and the property that is collateral		Did you claim the property as exempt on Schedule C?							
	Creditor's name:	Nissan Motor Acceptance	Surrender the property. Retain the property and redeem it. No								
	Description of property securing debt:	2016 Toyota Rav4	✓ Retain the property and enter into a Reaffirmation Agreement.☐ Retain the property and [explain]:								
	Creditor's name:	Toyota Motor Credit	Surrender the property. Retain the property and redeem it. No								
	Description of property securing debt:	2016 Toyota Rav4	✓ Retain the property and enter into a Reaffirmation Agreement.☐ Retain the property and [explain]:								

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 56 of 57

Debtor 1 Debtor 2	Hesham M Ahmed Inji H. Elsheikh			Case number (if known)	
Part 2	List Your Unexpired P	ersonal Pro	perty Leases		
fill in the	information below. Do not list re	eal estate leas	es. Unexpired leases are	ntory Contracts and Unexpired Leases (Official Form 106 e leases that are still in effect; the lease period has not e does not assume it. 11 U.S.C. § 365(p)(2).	G),
Desc	cribe your unexpired personal p	roperty leases		Will this lease be assumed?	
Non	e.				
Part 3	Sign Below				
	penalty of perjury, I declare tha nal property that is subject to an		•	ny property of my estate that secures a debt and	
	esham M Ahmed ım M Ahmed, Debtor 1	x	/s/ Inji H. Elsheikh Inji H. Elsheikh, Debtor 2		
Date	12/23/2017 MM / DD / YYYY		Date 12/23/2017 MM / DD / YYYY	_	

Case 17-38005 Doc 1 Filed 12/23/17 Entered 12/23/17 14:09:26 Desc Main Document Page 57 of 57

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

IN RE: Hesham M Ahmed Inji H. Elsheikh

CASE NO

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

The a	bove named	Debtor herek	by verifies th	at the attacl	ned list of	creditors	is true and	correct to th	e best of	his/her
knowledge.										

Date	12/23/2017	Signature /s/ Hesham M Ahmed	
		nesnam w Anmed	
Date	12/23/2017	Signature /s/ Inji H. Elsheikh Inji H. Elsheikh	